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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCK	CET NO.	CONFIRMATION NO.
10/660,565	10/660,565 09/12/2003		Howard Rhodes		M4065.0570/P570-A		5308
TITLE OF INVENTION: CMOS IMAGER PIXEL DESIGNS METHOD OF FORMING CMOS IMAGER PIXELS WITH CAPACITOR STRUCTURES							
METHON OF A	FORMING CI	nos Imager	PIKELS WI	TH CAPACI	TOR STRU	cturl	<i>=</i> 5
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL F	EE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1	810	03/30/2009
EXAMIN	ER	ART UNIT	CLASS-SUBCLASS				
ARENA, ANDRE	EW OWENS	2811	438-098000				
1. Change of correspondence	ce address or indication	n of "Fee Address" (37	2. For printing on the patent front page, list				
CFR 1.363). Change of correspon Address form PTO/SB/1	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,					
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cus Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME ANI	D RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)			
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.							
recordation as set forth in 3 / CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
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Micron Tech Please check the appropriat			•		orporation or other	private grou	p entity Government
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Publication Fee (No	small entity discount p	permitted)	Payment by credit	eard. Form PTO-203	8 is attached.		
Advance Order - # c	of Copies		The Director is her overpayment, to De	eby authorized to cha posit Account Numb	rge the required fee er 04-1073	(s), any defic (enclose an	ciency, or credit any extra copy of this form).
5. Change in Entity Status a. Applicant claims S			☐ b. Applicant is no	onger claiming SMA	LL ENTITY status.	. See 37 CFF	C 1.27(g)(2).
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Authorized Signature Galoriela Coman (#50,515) Date March 30, 2009							
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Thomas J. D'Amico

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